

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		21123.40
(b) Cash on Hand at Beginning of Reporting Period.....	23546.86	
(c) Total Receipts (from Line 19)	2321.62	14252.22
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	25868.48	35375.62
7. Total Disbursements (from Line 31).....	2500.00	12007.14
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	23368.48	23368.48
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

Report Covering the Period: From: 06 / 01 / 2015 To: 06 / 30 / 2015

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1822.48	6677.48
(ii) Unitemized	499.14	7574.74
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2321.62	14252.22
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2321.62	14252.22
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	2321.62	14252.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2321.62	14252.22

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	12000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	7.14
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2500.00	12007.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2500.00	12007.14

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2321.62	14252.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2321.62	14252.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Pam Bridges
Full Name (Last, First, Middle Initial)
Mailing Address 1625 Ormandy Drive

City Baton Rouge	State LA	Zip Code 70808
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Health Care Group, I	Occupation Corporate Trainer
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : SA11Al.16646

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$30 Bi-Weekly)

B. Pam Bridges
Full Name (Last, First, Middle Initial)
Mailing Address 1625 Ormandy Drive

City Baton Rouge	State LA	Zip Code 70808
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Health Care Group, I	Occupation Corporate Trainer
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : SA11Al.16647

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$30 Bi-Weekly)

C. Chris Duhon
Full Name (Last, First, Middle Initial)
Mailing Address 10429 Rue de Duhon

City Abbeville	State LA	Zip Code 70510
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation RN
-------------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : SA11Al.16648

Amount of Each Receipt this Period

30.00

Payroll Deduction (\$30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Chris Duhon
Full Name (Last, First, Middle Initial)

Mailing Address 10429 Rue de Duhon

City Abbeville	State LA	Zip Code 70510
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation RN
-------------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2015
Transaction ID : SA11AI.16649

Amount of Each Receipt this Period
30.00

Payroll Deduction (\$30 Bi-Weekly)

B. Ronda Dupree
Full Name (Last, First, Middle Initial)

Mailing Address 130 Hwy 132

City Delhi	State LA	Zip Code 71232
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation State Operation Director
-------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2015
Transaction ID : SA11AI.16650

Amount of Each Receipt this Period
30.00

Payroll Deduction (\$30 Bi-Weekly)

C. Ronda Dupree
Full Name (Last, First, Middle Initial)

Mailing Address 130 Hwy 132

City Delhi	State LA	Zip Code 71232
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation State Operation Director
-------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2015
Transaction ID : SA11AI.16651

Amount of Each Receipt this Period
30.00

Payroll Deduction (\$30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Lessley Fontenot
Full Name (Last, First, Middle Initial)

Mailing Address 2303 sandalwood Drive

City Lafayette State LA Zip Code 70570

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation Area Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : SA11AI.16644

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25 Bi-Weekly)

B. Lessley Fontenot
Full Name (Last, First, Middle Initial)

Mailing Address 2303 sandalwood Drive

City Lafayette State LA Zip Code 70570

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation Area Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : SA11AI.16645

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25 Bi-Weekly)

C. Jules Galiouras
Full Name (Last, First, Middle Initial)

Mailing Address 804 Woodmont Dr.

City Convington State LA Zip Code 70433

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation DVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : SA11AI.16632

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **70.00**

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Jules Galiouras
 Full Name (Last, First, Middle Initial)
 Mailing Address 804 Woodmont Dr.
 City Convington State LA Zip Code 70433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation DVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 26 / 2015
Transaction ID : SA11Al.16633
 Amount of Each Receipt this Period 20.00
 Payroll Deduction (\$20 Bi-Weekly)

B. Mary Gray
 Full Name (Last, First, Middle Initial)
 Mailing Address 1528 Greenwich Circle
 City Birmingham, State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation State Operation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 06 / 12 / 2015
Transaction ID : SA11Al.16652
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30 Bi-Weekly)

c. Mary Gray
 Full Name (Last, First, Middle Initial)
 Mailing Address 1528 Greenwich Circle
 City Birmingham, State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LHC Group Occupation State Operation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 26 / 2015
Transaction ID : SA11Al.16653
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Richard Hollier
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 95

City Opleousas State LA Zip Code 70571

FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Health Care Group, I Occupation Legal Compliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : SA11AI.16658

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40 Bi-Weekly)

B. Richard Hollier
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 95

City Opleousas State LA Zip Code 70571

FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Health Care Group, I Occupation Legal Compliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : SA11AI.16659

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40 Bi-Weekly)

C. Melanie Kuehn
Full Name (Last, First, Middle Initial)

Mailing Address 4205 Persimmon Way

City Lake Charles State LA Zip Code 70518

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation DVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : SA11AI.16666

Amount of Each Receipt this Period **50.00**

Payroll Deduction (\$50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **130.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Melanie Kuehn
Full Name (Last, First, Middle Initial)

Mailing Address 4205 Persimmon Way

City Lake Charles State LA Zip Code 70518

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation DVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : SA11AI.16667

Amount of Each Receipt this Period **50.00**

Payroll Deduction (\$50 Bi-Weekly)

B. Amy Laing
Full Name (Last, First, Middle Initial)

Mailing Address 238 Dogwood Springs Lane

City Mena State AR Zip Code 71953

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation State Market Developer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : SA11AI.16660

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40 Bi-Weekly)

C. Amy Laing
Full Name (Last, First, Middle Initial)

Mailing Address 238 Dogwood Springs Lane

City Mena State AR Zip Code 71953

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation State Market Developer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : SA11AI.16661

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 21
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Errol Leblanc
Full Name (Last, First, Middle Initial)
Mailing Address 5908 John Boudreaux Road,
City Abbeville State LA Zip Code 70510
FEC ID number of contributing federal political committee. **C**
Name of Employer LHC Group Occupation PT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 06 / 12 / 2015
Transaction ID : SA11AI.16634
Amount of Each Receipt this Period 200.00
Payroll Deduction (\$20 Bi-Weekly)

B. Errol Leblanc
Full Name (Last, First, Middle Initial)
Mailing Address 5908 John Boudreaux Road,
City Abbeville State LA Zip Code 70510
FEC ID number of contributing federal political committee. **C**
Name of Employer LHC Group Occupation PT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 26 / 2015
Transaction ID : SA11AI.16635
Amount of Each Receipt this Period 200.00
Payroll Deduction (\$20 Bi-Weekly)

C. Richard MacMillian
Full Name (Last, First, Middle Initial)
Mailing Address 324 Deer Park Trial
City Lafayette State LA Zip Code 70508
FEC ID number of contributing federal political committee. **C**
Name of Employer LHC Group Occupation Legal Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2090.00

Date of Receipt 06 / 12 / 2015
Transaction ID : SA11AI.16672
Amount of Each Receipt this Period 190.00
Payroll Deduction (\$190 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 230.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 21
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Richard MacMillian
Full Name (Last, First, Middle Initial)
Mailing Address 324 Deer Park Trail
City Lafayette State LA Zip Code 70508
FEC ID number of contributing federal political committee. **C**
Name of Employer LHC Group Occupation Legal Counsel
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2280.00

Date of Receipt 06 / 26 / 2015
Transaction ID : SA11AI.16673
Amount of Each Receipt this Period 190.00
Payroll Deduction (\$190 Bi-Weekly)

B. Brach Myers
Full Name (Last, First, Middle Initial)
Mailing Address 201 Worth Ave.
City Lafayette State LA Zip Code 70508
FEC ID number of contributing federal political committee. **C**
Name of Employer LHC Group Occupation Vice President of Strategic Partnershi
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 440.00

Date of Receipt 06 / 12 / 2015
Transaction ID : SA11AI.16662
Amount of Each Receipt this Period 40.00
Payroll Deduction (\$40 Bi-Weekly)

C. Brach Myers
Full Name (Last, First, Middle Initial)
Mailing Address 201 Worth Ave.
City Lafayette State LA Zip Code 70508
FEC ID number of contributing federal political committee. **C**
Name of Employer LHC Group Occupation Vice President of Strategic Partnershi
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 480.00

Date of Receipt 06 / 26 / 2015
Transaction ID : SA11AI.16663
Amount of Each Receipt this Period 40.00
Payroll Deduction (\$40 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 270.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Keith Myers
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 Morning Mist
 City State Zip Code
 Sunset LA 70584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The LHC Group President/CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : SA11AI.16664
 Amount of Each Receipt this Period
 40.00
 Payroll Deduction (\$40 Bi-Weekly)

B. Keith Myers
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 Morning Mist
 City State Zip Code
 Sunset LA 70584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The LHC Group President/CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : SA11AI.16665
 Amount of Each Receipt this Period
 40.00
 Payroll Deduction (\$40 Bi-Weekly)

C. Ted Pappas
 Full Name (Last, First, Middle Initial)
 Mailing Address 440 Hwy 758
 City State Zip Code
 Eunice LA 70535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LHC Group PT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 211.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : SA11AI.16629
 Amount of Each Receipt this Period
 19.24
 Payroll Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 99.24
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Ted Pappas
Full Name (Last, First, Middle Initial)

Mailing Address 440 Hwy 758

City State Zip Code
Eunice LA 70535

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LHC Group PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.88

Date of Receipt
MM / DD / YYYY
06 / 26 / 2015
Transaction ID : SA11AI.16631

Amount of Each Receipt this Period
19.24

Payroll Deduction (\$19.24 Bi-Weekly)

B. Melisa Rittenberry
Full Name (Last, First, Middle Initial)

Mailing Address 3341 Quail Run Ct

City State Zip Code
Nashville TN 37214

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LHC Group Regional Operations Directory

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
06 / 12 / 2015
Transaction ID : SA11AI.16636

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20 Bi-Weekly)

C. Melisa Rittenberry
Full Name (Last, First, Middle Initial)

Mailing Address 3341 Quail Run Ct

City State Zip Code
Nashville TN 37214

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LHC Group Regional Operations Directory

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2015
Transaction ID : SA11AI.16637

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	59.24
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 21
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial)
A. Albert Simien

Mailing Address 111 Shadowbrook Lane

City Youngsville State LA Zip Code 70592

FEC ID number of contributing federal political committee. **C**

Name of Employer LGC Group Occupation Director of Purchasing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **423.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11Al.16654

Amount of Each Receipt this Period
38.50

Payroll Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Albert Simien

Mailing Address 111 Shadowbrook Lane

City Youngsville State LA Zip Code 70592

FEC ID number of contributing federal political committee. **C**

Name of Employer LGC Group Occupation Director of Purchasing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **462.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : SA11Al.16655

Amount of Each Receipt this Period
38.50

Payroll Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Tami Stout

Mailing Address 1113 Fawn Run

City Somerset State KY Zip Code 92501

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation State Market Development Dir.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11Al.16638

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **97.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial)
A. Tami Stout

Mailing Address 1113 Fawn Run

City Somerset, State KY Zip Code 92501

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation State Market Development Dir.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : SA11AI.16639

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Harold Taylor

Mailing Address 252 Purple Dawn Drive

City Sunset State LA Zip Code 70584

FEC ID number of contributing federal political committee. **C**

Name of Employer La. Home Care Group, Inc. Occupation Director of Purchasing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **423.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11AI.16656

Amount of Each Receipt this Period
38.50

Payroll Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Harold Taylor

Mailing Address 252 Purple Dawn Drive

City Sunset State LA Zip Code 70584

FEC ID number of contributing federal political committee. **C**

Name of Employer La. Home Care Group, Inc. Occupation Director of Purchasing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **462.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : SA11AI.16657

Amount of Each Receipt this Period
38.50

Payroll Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **97.00**

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. Gary Thietten
Full Name (Last, First, Middle Initial)

Mailing Address 10611 Pine Shadow Road

City South Jordan State UT Zip Code 84095

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation VP of Corp. Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11Al.16670

Amount of Each Receipt this Period
100.00

Payroll Deduction (\$100 Bi-Weekly)

B. Gary Thietten
Full Name (Last, First, Middle Initial)

Mailing Address 10611 Pine Shadow Road

City South Jordan State UT Zip Code 84095

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation VP of Corp. Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : SA11Al.16671

Amount of Each Receipt this Period
100.00

Payroll Deduction (\$100 Bi-Weekly)

C. James Tobey
Full Name (Last, First, Middle Initial)

Mailing Address 465 Leo Avenue

City Shreveport State LA Zip Code 71105

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation Director of Sales and Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11Al.16668

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **250.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

A. James Tobey
Full Name (Last, First, Middle Initial)

Mailing Address 465 Leo Avenue

City Shreveport State LA Zip Code 71105

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation Director of Sales and Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : SA11Al.16669

Amount of Each Receipt this Period
50.00

Payroll Deduction (\$50 Bi-Weekly)

B. Cynthia Wells
Full Name (Last, First, Middle Initial)

Mailing Address 367 Adams Circle

City Crawfordsville State AR Zip Code 72327

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Groups Occupation Hospice Regional Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : SA11Al.16640

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20 Bi-Weekly)

C. Cynthia Wells
Full Name (Last, First, Middle Initial)

Mailing Address 367 Adams Circle

City Crawfordsville State AR Zip Code 72327

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Groups Occupation Hospice Regional Operations Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : SA11Al.16641

Amount of Each Receipt this Period
20.00

Payroll Deduction (\$20 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **90.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial) A. Christa Williams		Date of Receipt
Mailing Address 1549 Camelot Dr,		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City Henderson	State KY	Zip Code 42420
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.16642
Name of Employer LHC Group		Amount of Each Receipt this Period
Occupation RN		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Payroll Deduction (\$20 Bi-Weekly)
Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>		

Full Name (Last, First, Middle Initial) B. Christa Williams		Date of Receipt
Mailing Address 1549 Camelot Dr,		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City Henderson	State KY	Zip Code 42420
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.16643
Name of Employer LHC Group		Amount of Each Receipt this Period
Occupation RN		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Payroll Deduction (\$20 Bi-Weekly)
Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>		

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text"/>
Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Payroll Deduction (\$20 Bi-Weekly)
Aggregate Year-to-Date ▼ <input type="text"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="40.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="1822.48"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

Full Name (Last, First, Middle Initial)

A. WALDEN FOR CONGRESS

Mailing Address PO BOX 1091

City HOOD RIVER State OR Zip Code 97031

Purpose of Disbursement
Donation

011

Category/
Type

Candidate Name

GREGORY P MR. WALDEN

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OR District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 04 / 2015

Transaction ID : SB23.16675

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

2500.00

TOTAL This Period (last page this line number only)..... ▶

2500.00